

0033697



## Department of Energy

Richland Field Office

P.O. Box 550

Richland, Washington 99352

9305744

94-RPS-069

DEC 16 1993

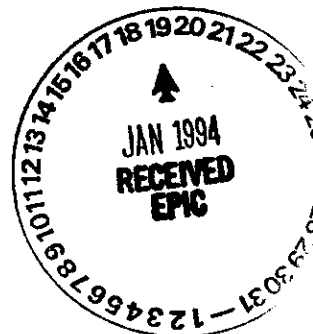
Mr. David B. Jansen, P.E.  
State of Washington  
Department of Ecology  
P.O. Box 47600  
Olympia, Washington 98504-7600

Dear Mr. Jansen:

HANFORD FACILITY DANGEROUS WASTE PART A PERMIT APPLICATION FORM 3,  
REVISION 0, FOR THE 216-B-3 EXPANSION PONDS (WA7890008967) (TSD: D-2-5)

Enclosed is the Hanford Facility Dangerous Waste Part A Permit Application (Part A) Form 3, Revision 4, for the 216-B-3 Expansion Ponds (Expansion Ponds). The Expansion Ponds are located in the 200 East Area of the Hanford Facility and were used for the treatment and disposal of process and cooling liquid effluent from various 200 East Area units.

This treatment and disposal group was part of the larger 216-B-3 Pond System, which included both the Expansion Ponds and the 216-B-3 Main Pond (Main Pond). In a letter dated September 3, 1993, the State of Washington Department of Ecology concurred with the U.S. Department of Energy, Richland Operations Office (RL) and the Westinghouse Hanford Company (WHC) proposal to divide the 216-B-3 Pond System into two distinct treatment, storage, and/or disposal groups, each with a separate Part A, Form 3. The two separate Part A, Form 3s support the preparation of separate closure/postclosure plans for the Main Pond and the Expansion Ponds. Separate closure/postclosure plans are being prepared because the Expansion Ponds are currently undergoing clean closure separate from the Main Pond. The Main Pond will be closed in coordination with the Resource Conservation and Recovery Act past practice activities for its operable unit.



Mr. Jansen  
94-RPS-069

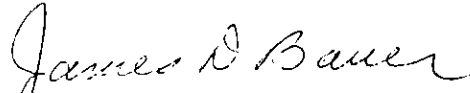
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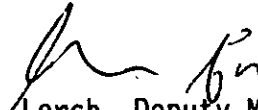
Should you have any questions regarding the Expansion Ponds Part A, Revision 0, please contact Mr. C. E. Clark of RL on (509) 376-9333 or Mr. R. C. Bowman of WHC on (509) 376-4876.

Sincerely,



James D. Bauer, Program Manager  
Office of Environmental Assurance,  
Permits, and Policy  
DOE Richland Operations Office

EAP:CEC



R. E. Lerch, Deputy Manager  
Restoration and Remediation  
Westinghouse Hanford Company

Enclosure:  
216-B-3 Expansion Ponds Dangerous  
Waste Part A Permit Application  
Form 3, Revision 0

cc w/enclosure:  
D. L. Duncan, EPA  
T. M. Michelena, Ecology  
D. C. Nylander, Ecology  
Administrative Records, H6-08  
J. J. Wallace, Ecology

cc w/o enclosure:  
R. C. Bowman, WHC  
R. E. Lerch, WHC  
S. M. Price, WHC  
D. R. Butler, Ecology  
J. M. Atwood, Ecology

Please print or type in the unshaded areas only  
(fill-in areas are spaced for elite type, i.e., 12 character/inch).

| <b>FORM</b><br><b>3</b>  | <b>DANGEROUS WASTE PERMIT APPLICATION</b>       | 1. EPA/STATE I.D. NUMBER<br><table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:10%;">W</td><td style="width:10%;">A</td><td style="width:10%;">7</td><td style="width:10%;">8</td><td style="width:10%;">9</td><td style="width:10%;">0</td><td style="width:10%;">0</td><td style="width:10%;">0</td><td style="width:10%;">8</td><td style="width:10%;">9</td><td style="width:10%;">6</td><td style="width:10%;">7</td></tr></table> | W  | A               | 7   | 8   | 9                              | 0   | 0                 | 0   | 8   | 9                 | 6          | 7   |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
|--|---|--|--|-----------------|---|---|--------------------------------|-----|-------------------|---|-----|-------------------|------------|-----|--------------------------------|---------------------|-----|-------------------|------------------|--|--|----------------|-----|-------------------|----------|-----|--|------------------|-----|--------------------------------------|----------------|-----|--------------------------------------|---------------------|-----|-------------------|---|---------|----------------------|--|-------------------|--|--|------|-----|--------------------------------------|---------------------|-----|--------------------------------------|-------------|-----|---|--|-----|--------------------------------------|--|-----------------|----------------------------|---------|---|--------|---|-------------|---|--------------|---|-----------------|---|----------------|---|---------------|---|----------------------|---|------------------|---|-----------------|---|--|-----------------|----------------------------|-----------|---|---------------|---|-------|---|----------|---|
| W  | A   | 7  | 8  | 9               | 0   | 0   | 0                              | 8   | 9                 | 6   | 7   |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <b>FOR OFFICIAL USE ONLY</b>   |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| APPLICATION APPROVED   | DATE RECEIVED<br>(mo., day, & yr.)              | COMMENTS   |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
|  |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <b>II. FIRST OR REVISED APPLICATION</b>  |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <small>Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA/STATE I.D. Number, or if this is a revised application, enter your facility's EPA/STATE I.D. Number in Section I above.</small>   |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <b>A. FIRST APPLICATION</b> (place an "X" below and provide the appropriate date)  |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <input type="checkbox"/> 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)   |   | <input type="checkbox"/> 2. NEW FACILITY (Complete item below)   |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:10%;">MO.</td><td style="width:10%;">DAY</td><td style="width:10%;">YR.</td></tr><tr><td style="text-align: center;">1</td><td style="text-align: center;">0</td><td style="text-align: center;">8</td></tr><tr><td style="text-align: center;">3</td><td></td><td></td></tr></table>  | MO.   | DAY  | YR.  | 1               | 0   | 8   | 3                              |     |                   | <small>FOR EXISTING FACILITIES, PROVIDE THE DATE (mo., day, &amp; yr.) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)</small> |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| MO.  | DAY   | YR.  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| 1  | 0   | 8  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| 3  |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:10%;">MO.</td><td style="width:10%;">DAY</td><td style="width:10%;">YR.</td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></table>  | MO.   | DAY  | YR.  |                 |   |   |                                |     |                   | <small>FOR NEW FACILITIES, PROVIDE THE DATE (mo., day, &amp; yr.) OPERATION BEGAN OR IS EXPECTED TO BEGIN</small>   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| MO.  | DAY   | YR.  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
|  |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
|  |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <b>B. REVISED APPLICATION</b> (place an "X" below and complete Section I above)  |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <input checked="" type="checkbox"/> 1. FACILITY HAS AN INTERIM STATUS PERMIT   |   | <input type="checkbox"/> 2. FACILITY HAS A FINAL PERMIT  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <b>III. PROCESSES - CODES AND CAPACITIES</b>   |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <b>A. PROCESS CODE</b> - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the (Section III-C).   |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <b>B. PROCESS DESIGN CAPACITY</b> - For each code entered in column A enter the capacity of the process.   |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <b>1. AMOUNT</b> - Enter the amount.   |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <b>2. UNIT OF MEASURE</b> - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.  |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th style="width:40%;">PROCESS</th><th style="width:10%;">PRO-<br/>CESS<br/>CODE</th><th style="width:50%;">APPROPRIATE UNITS OF<br/>MEASURE FOR PROCESS<br/>DESIGN CAPACITY</th></tr></thead><tbody><tr><td colspan="3"><b>Storage:</b></td></tr><tr><td>CONTAINER (barrel, drum, etc)</td><td>S01</td><td>GALLONS OR LITERS</td></tr><tr><td>TANK</td><td>S02</td><td>GALLONS OR LITERS</td></tr><tr><td>WASTE PILE</td><td>S03</td><td>CUBIC YARDS OR<br/>CUBIC METERS</td></tr><tr><td>SURFACE IMPOUNDMENT</td><td>S04</td><td>GALLONS OR LITERS</td></tr><tr><td colspan="3"><b>Disposal:</b></td></tr><tr><td>INJECTION WELL</td><td>D80</td><td>GALLONS OR LITERS</td></tr><tr><td>LANDFILL</td><td>D81</td><td>ACRE-FEET (the volume that<br/>would cover one acre to a<br/>depth of one foot)<br/>OR HECTARE-METER<br/>ACRES OR HECTARES</td></tr><tr><td>LAND APPLICATION</td><td>D82</td><td>GALLONS PER DAY OR<br/>LITERS PER DAY</td></tr><tr><td>OCEAN DISPOSAL</td><td>D83</td><td>GALLONS PER DAY OR<br/>LITERS PER DAY</td></tr><tr><td>SURFACE IMPOUNDMENT</td><td>D84</td><td>GALLONS OR LITERS</td></tr></tbody></table> | PROCESS   | PRO-<br>CESS<br>CODE   | APPROPRIATE UNITS OF<br>MEASURE FOR PROCESS<br>DESIGN CAPACITY | <b>Storage:</b> |   |   | CONTAINER (barrel, drum, etc)  | S01 | GALLONS OR LITERS | TANK  | S02 | GALLONS OR LITERS | WASTE PILE | S03 | CUBIC YARDS OR<br>CUBIC METERS | SURFACE IMPOUNDMENT | S04 | GALLONS OR LITERS | <b>Disposal:</b> |  |  | INJECTION WELL | D80 | GALLONS OR LITERS | LANDFILL | D81 | ACRE-FEET (the volume that<br>would cover one acre to a<br>depth of one foot)<br>OR HECTARE-METER<br>ACRES OR HECTARES | LAND APPLICATION | D82 | GALLONS PER DAY OR<br>LITERS PER DAY | OCEAN DISPOSAL | D83 | GALLONS PER DAY OR<br>LITERS PER DAY | SURFACE IMPOUNDMENT | D84 | GALLONS OR LITERS | <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th style="width:40%;">PROCESS</th><th style="width:10%;">PRO-<br/>CESS<br/>CODE</th><th style="width:50%;">APPROPRIATE UNITS OF<br/>MEASURE FOR PROCESS<br/>DESIGN CAPACITY</th></tr></thead><tbody><tr><td colspan="3"><b>Treatment:</b></td></tr><tr><td>TANK</td><td>T01</td><td>GALLONS PER DAY OR<br/>LITERS PER DAY</td></tr><tr><td>SURFACE IMPOUNDMENT</td><td>T02</td><td>GALLONS PER DAY OR<br/>LITERS PER DAY</td></tr><tr><td>INCINERATOR</td><td>T03</td><td>TONS PER HOUR OR<br/>METRIC TONS PER HOUR;<br/>GALLONS PER HOUR OR<br/>LITERS PER HOUR</td></tr><tr><td>OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Section III-C.)</td><td>T04</td><td>GALLONS PER DAY OR<br/>LITERS PER DAY</td></tr></tbody></table> | PROCESS | PRO-<br>CESS<br>CODE | APPROPRIATE UNITS OF<br>MEASURE FOR PROCESS<br>DESIGN CAPACITY | <b>Treatment:</b> |  |  | TANK | T01 | GALLONS PER DAY OR<br>LITERS PER DAY | SURFACE IMPOUNDMENT | T02 | GALLONS PER DAY OR<br>LITERS PER DAY | INCINERATOR | T03 | TONS PER HOUR OR<br>METRIC TONS PER HOUR;<br>GALLONS PER HOUR OR<br>LITERS PER HOUR | OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Section III-C.) | T04 | GALLONS PER DAY OR<br>LITERS PER DAY | <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th style="width:40%;">UNIT OF MEASURE</th><th style="width:10%;">UNIT OF<br/>MEASURE<br/>CODE</th></tr></thead><tbody><tr><td>GALLONS</td><td>G</td></tr><tr><td>LITERS</td><td>L</td></tr><tr><td>CUBIC YARDS</td><td>Y</td></tr><tr><td>CUBIC METERS</td><td>C</td></tr><tr><td>GALLONS PER DAY</td><td>U</td></tr><tr><td>LITERS PER DAY</td><td>V</td></tr><tr><td>TONS PER HOUR</td><td>D</td></tr><tr><td>METRIC TONS PER HOUR</td><td>W</td></tr><tr><td>GALLONS PER HOUR</td><td>E</td></tr><tr><td>LITERS PER HOUR</td><td>H</td></tr></tbody></table> | UNIT OF MEASURE | UNIT OF<br>MEASURE<br>CODE | GALLONS | G | LITERS | L | CUBIC YARDS | Y | CUBIC METERS | C | GALLONS PER DAY | U | LITERS PER DAY | V | TONS PER HOUR | D | METRIC TONS PER HOUR | W | GALLONS PER HOUR | E | LITERS PER HOUR | H | <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th style="width:40%;">UNIT OF MEASURE</th><th style="width:10%;">UNIT OF<br/>MEASURE<br/>CODE</th></tr></thead><tbody><tr><td>ACRE-FEET</td><td>A</td></tr><tr><td>HECTARE-METER</td><td>F</td></tr><tr><td>ACRES</td><td>B</td></tr><tr><td>HECTARES</td><td>Q</td></tr></tbody></table> | UNIT OF MEASURE | UNIT OF<br>MEASURE<br>CODE | ACRE-FEET | A | HECTARE-METER | F | ACRES | B | HECTARES | Q |
| PROCESS  | PRO-<br>CESS<br>CODE                            | APPROPRIATE UNITS OF<br>MEASURE FOR PROCESS<br>DESIGN CAPACITY   |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <b>Storage:</b>  |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| CONTAINER (barrel, drum, etc)  | S01   | GALLONS OR LITERS  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| TANK   | S02   | GALLONS OR LITERS  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| WASTE PILE   | S03   | CUBIC YARDS OR<br>CUBIC METERS   |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| SURFACE IMPOUNDMENT  | S04   | GALLONS OR LITERS  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <b>Disposal:</b>   |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| INJECTION WELL   | D80   | GALLONS OR LITERS  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| LANDFILL   | D81   | ACRE-FEET (the volume that<br>would cover one acre to a<br>depth of one foot)<br>OR HECTARE-METER<br>ACRES OR HECTARES   |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| LAND APPLICATION   | D82   | GALLONS PER DAY OR<br>LITERS PER DAY   |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| OCEAN DISPOSAL   | D83   | GALLONS PER DAY OR<br>LITERS PER DAY   |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| SURFACE IMPOUNDMENT  | D84   | GALLONS OR LITERS  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| PROCESS  | PRO-<br>CESS<br>CODE                            | APPROPRIATE UNITS OF<br>MEASURE FOR PROCESS<br>DESIGN CAPACITY   |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <b>Treatment:</b>  |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| TANK   | T01   | GALLONS PER DAY OR<br>LITERS PER DAY   |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| SURFACE IMPOUNDMENT  | T02   | GALLONS PER DAY OR<br>LITERS PER DAY   |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| INCINERATOR  | T03   | TONS PER HOUR OR<br>METRIC TONS PER HOUR;<br>GALLONS PER HOUR OR<br>LITERS PER HOUR  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Section III-C.)   | T04   | GALLONS PER DAY OR<br>LITERS PER DAY   |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| UNIT OF MEASURE  | UNIT OF<br>MEASURE<br>CODE                      |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| GALLONS  | G   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| LITERS   | L   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| CUBIC YARDS  | Y   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| CUBIC METERS   | C   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| GALLONS PER DAY  | U   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| LITERS PER DAY   | V   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| TONS PER HOUR  | D   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| METRIC TONS PER HOUR   | W   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| GALLONS PER HOUR   | E   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| LITERS PER HOUR  | H   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| UNIT OF MEASURE  | UNIT OF<br>MEASURE<br>CODE                      |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| ACRE-FEET  | A   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| HECTARE-METER  | F   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| ACRES  | B   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| HECTARES   | Q   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| <small>EXAMPLE FOR COMPLETING SECTION III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.</small>   |   |  |  |                 |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| LINE<br>NUMBER   | A. PRO-<br>CESS<br>CODE<br>(from list<br>above) | B. PROCESS DESIGN CAPACITY   | FOR<br>OFFICIAL<br>USE<br>ONLY                                 | LINE<br>NUMBER  | A. PRO-<br>CESS<br>CODE<br>(from list<br>above) | B. PROCESS DESIGN CAPACITY                    | FOR<br>OFFICIAL<br>USE<br>ONLY |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
|  |   | 1. AMOUNT<br>(specify)   |  |                 |   | 1. AMOUNT<br>(specify)                        |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
|  |   | 2. UNIT<br>OF MEA-<br>SURE<br>(enter<br>code)  |  |                 |   | 2. UNIT<br>OF MEA-<br>SURE<br>(enter<br>code) |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| X-1  | S 0 2   | 600  |  | 5               |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| X-2  | T 0 3   | 20   |  | 6               |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| 1  | T 0 2   | 27,960,000   |  | 7               |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| 2  | D 8 4   | 27,960,000   |  | 8               |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| 3  |   |  |  | 9               |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |
| 4  |   |  |  | 10              |   |   |                                |     |                   |   |     |                   |            |     |                                |                     |     |                   |                  |  |  |                |     |                   |          |     |  |                  |     |                                      |                |     |                                      |                     |     |                   |   |         |                      |  |                   |  |  |      |     |                                      |                     |     |                                      |             |     |   |  |     |                                      |  |                 |                            |         |   |        |   |             |   |              |   |                 |   |                |   |               |   |                      |   |                  |   |                 |   |  |                 |                            |           |   |               |   |       |   |          |   |

Continued from the front.

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESS (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

T02, D84

The 216-B-3 Expansion Ponds (Expansion Ponds) consist of three interconnected ponds called the 216-B-3A (3A) Pond, the 216-B-3B (3B) Pond, and the 216-B-3C (3C) Pond. These ponds were constructed to receive the increased discharges to the 216-B-3 Pond System, which includes the 216-B-3 Main Pond (Main Pond), a separate dangerous waste treatment and disposal unit as a result of the restart of the Plutonium Uranium Extraction (PUREX) Plant in 1983 and the decommissioning of the Gable Mountain Pond in 1987. The 3A Pond was placed into service in October 1983 and remains in service today. The 3A Pond receives effluent from the Main Pond through a spillway in the dike separating the two ponds. A similar spillway allowed the 3B Pond, which was operational from June 1984 to May 1985, to receive effluent from the 3A Pond. The 3A and 3B Ponds each cover an area of approximately 11 acres (4.4 hectares). The 3C Pond began operation in 1985 and is still in service today. The 3C Pond was constructed by excavating 6 feet (1.8 meters) of soil over a 41-acre (16-hectare) surface area. A spillway similar to the ones used for the 3A and 3B Ponds conveys effluent from the 3A Pond to the 3C Pond.

Waste water (primarily process and cooling water) from the PUREX Plant, the B Plant Complex, the 242-A Evaporator, and other 200 East Area units is received by the expansion ponds through the Main Pond. The Expansion Ponds received corrosive waste as a result of the regeneration of the PUREX Plant demineralizer columns (D84). Treatment of the waste occurred by the successive discharge of acidic and caustic waste, which served to neutralize the corrosivity of the waste before and upon reaching the Expansion Ponds. Residual corrosivity was neutralized by the calcareous nature of the Expansion Ponds soil (T02).

The process design capacities given for the waste process codes T02 [27,960,000 gallons (105,840,000 liters) per day] and D84 [27,960,000 gallons (105,840,000 liters)] represent the Expansion Ponds proportional share (based on percolation capacity) of the process design capacity of the entire B Pond System. At the peak of operations, approximately 22,000,000 gallons (83,280,000 liters) per day of liquid was discharged to the entire 216-B-3 Pond System. Presently, approximately 1,500 gallons (5,678 liters) to 6,000 gallons (22,712 liters) per minute of nondangerous liquid effluent are being sent to the 216-B-3 Pond System.

Construction was begun on a new pipeline in 1990 that will allow waste water to bypass the 216-B-3 Main Pond and discharge directly to the Expansion Ponds.

IV. DESCRIPTION OF DANGEROUS WASTES

- A. DANGEROUS WASTE NUMBER - Enter the four digit number from Chapter 173-303 WAC for each listed dangerous waste you will handle. If you handle dangerous wastes which are not listed in Chapter 173-303 WAC, enter the four digit number(s) that describes the characteristics and/or the toxic contaminants of those dangerous wastes.
- B. ESTIMATED ANNUAL QUANTITY - For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE - For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

| ENGLISH UNIT OF MEASURE | CODE | METRIC UNIT OF MEASURE | CODE |
|-------------------------|------|------------------------|------|
| POUNDS .....            | P    | KILOGRAMS .....        | K    |
| TONS .....              | T    | METRIC TONS .....      | M    |

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed dangerous waste: For each listed dangerous waste entered in column A select the code(s) from the list of process codes contained in Section III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed dangerous wastes: For each characteristic or toxic contaminant entered in Column A, select the code(s) from the list of process codes contained in Section III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed dangerous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: DANGEROUS WASTES DESCRIBED BY MORE THAN ONE DANGEROUS WASTE NUMBER - Dangerous wastes that can be described by more than one Waste Number shall be described on the form as follows:

- Select one of the Dangerous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- In column A of the next line enter the other Dangerous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
- Repeat step 2 for each other Dangerous Waste Number that can be used to describe the dangerous waste.

EXAMPLE FOR COMPLETING SECTION IV (shown in line numbers X-1, X-2, X-3, and X-4 below) - A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

| LINE | A. DANGEROUS WASTE NO.<br>(enter code) | B. ESTIMATED ANNUAL QUANTITY OF WASTE | C. UNIT OF MEASURE<br>(enter code) | D. PROCESSES                |  |
|------|--|---------------------------------------|------------------------------------|-----------------------------|--|
|      |  |                                       |                                    | 1. PROCESS CODES<br>(enter) | 2. PROCESS DESCRIPTION<br>(if a code is not entered in D(1)) |
| X-1  | K 0 5 4                                | 900                                   | P                                  | T 0 3 D 8 0                 |  |
| X-2  | D 0 0 2                                | 400                                   | P                                  | T 0 3 D 8 0                 |  |
| X-3  | D 0 0 1                                | 100                                   | P                                  | T 0 3 D 8 0                 |  |
| X-4  | D 0 0 2                                |                                       |                                    | T 0 3 D 8 0                 | included with above  |

Continued from page 2.  
NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

I.D. NUMBER (entered from page 1)

W A 7 8 9 0 0 0 8 9 6 7

IV. DESCRIPTION OF DANGEROUS WASTES (continued)

| LINE NO. | A. DANGEROUS WASTE NO.<br>(enter code) | B. ESTIMATED ANNUAL QUANTITY OF WASTE | C. UNIT OF MEASURE<br>(enter code) | D. PROCESSES                |     |  |  |  |  |                            |  |
|----------|--|---------------------------------------|------------------------------------|-----------------------------|-----|--|--|--|--|----------------------------|--|
|          |  |                                       |                                    | 1. PROCESS CODES<br>(enter) |     |  |  | 2. PROCESS DESCRIPTION<br>(if a code is not entered in D(1)) |  |                            |  |
| 1        | D 0 0 2                                | 117,200,000                           | P                                  | T02                         | D84 |  |  |  |  | Neutralization/Percolation |  |
| 2        | W T 0 2                                | 2,573,000                             | ↓                                  | ↓                           | ↓   |  |  |  |  | included with above        |  |
| 3        | U 1 3 3                                | 1,478,000                             | P                                  | T02                         | D84 |  |  |  |  | Neutralization/Percolation |  |
| 4        | W T 0 1                                | 484,000                               | P                                  | T02                         | D84 |  |  |  |  | Neutralization/Percolation |  |
| 5        | D 0 0 6                                | 149,000                               | ↓                                  | ↓                           | ↓   |  |  |  |  | included with above        |  |
| 6        |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 7        |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 8        |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 9        |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 10       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 11       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 12       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 13       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 14       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 15       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 16       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 17       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 18       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 19       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 20       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 21       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 22       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 23       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 24       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 25       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |
| 26       |  |                                       |                                    |                             |     |  |  |  |  |                            |  |

Continued from the front.

## IV. DESCRIPTION OF DANGEROUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM SECTION D(1) ON PAGE 3.

The 216-B-3 Expansion Ponds (Expansion Ponds) received dangerous waste from two main sources: (1) corrosive and toxic dangerous waste resulting from the regeneration of demineralizer columns at the PUREX Plant, and (2) spills of dangerous or mixed waste at the PUREX Plant. Backwash from the regeneration of the demineralizer columns was frequently corrosive (D002) and sometimes contained toxic concentrations of chemicals used in the regeneration process, including nitric acid, sulfuric acid, sodium hydroxide, and potassium hydroxide (WT02). Spills at the PUREX Plant included hydrazine (U133), cadmium nitrate (WT01/D006), and ammonium fluoride/ammonium nitrate (WT01). Since 1984, administrative and engineering barriers have been put in place at the PUREX Plant to prevent dangerous waste from being discharged into the Expansion Ponds.

The quantity of waste listed for D002/WT02 is an estimated annual quantity based on the Expansion Ponds proportional share (based on percolation capacity) of the amount of corrosive and toxic dangerous waste received by the entire 216-B-3 Pond System (which includes the 216-B-3 Main Pond, a separate dangerous waste treatment and disposal unit). The quantities of waste listed for U133 and WT01/D006 represent the Expansion Ponds' proportional share (based on percolation capacity) of the total recorded amount of hydrazine, cadmium, and ammonium fluoride/ammonium nitrate received by the entire B Pond System from the time the PUREX Plant resumed operations in 1983 until the last known chemical discharge occurred in 1987.

The quantities of waste listed for U133 and WT01/D006 include the water in which the chemicals were discharged. Water makes up most of the weight of these discharges.

## V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

## VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

## VII. FACILITY GEOGRAPHIC LOCATION

This information is provided on the attached drawings and photos.

LATITUDE (degrees, minutes, &amp; seconds)

LONGITUDE (degrees, minutes, &amp; seconds)

## VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code &amp; no.)

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

## IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

NAME (print or type)

John D. Wagoner, Manager  
U.S. Department of Energy  
Richland Operations Office

SIGNATURE



DATE SIGNED

12/16/93

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

NAME (print or type)

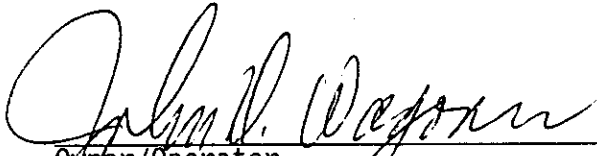
SEE ATTACHMENT

SIGNATURE


DATE SIGNED

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

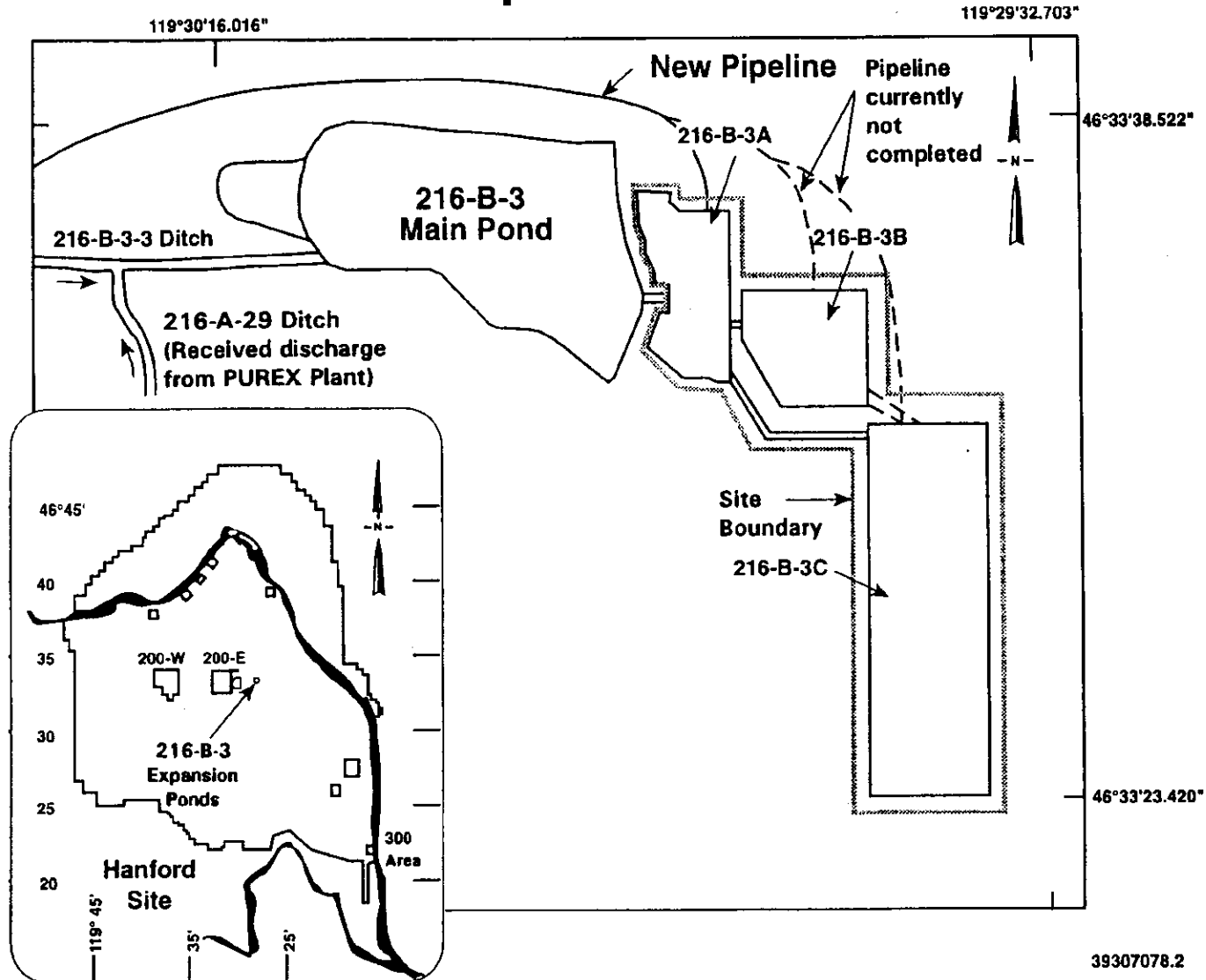
  
\_\_\_\_\_  
Owner/Operator  
John D. Wagoner, Manager  
U.S. Department of Energy  
Richland Operations Office

12/16/93  
Date

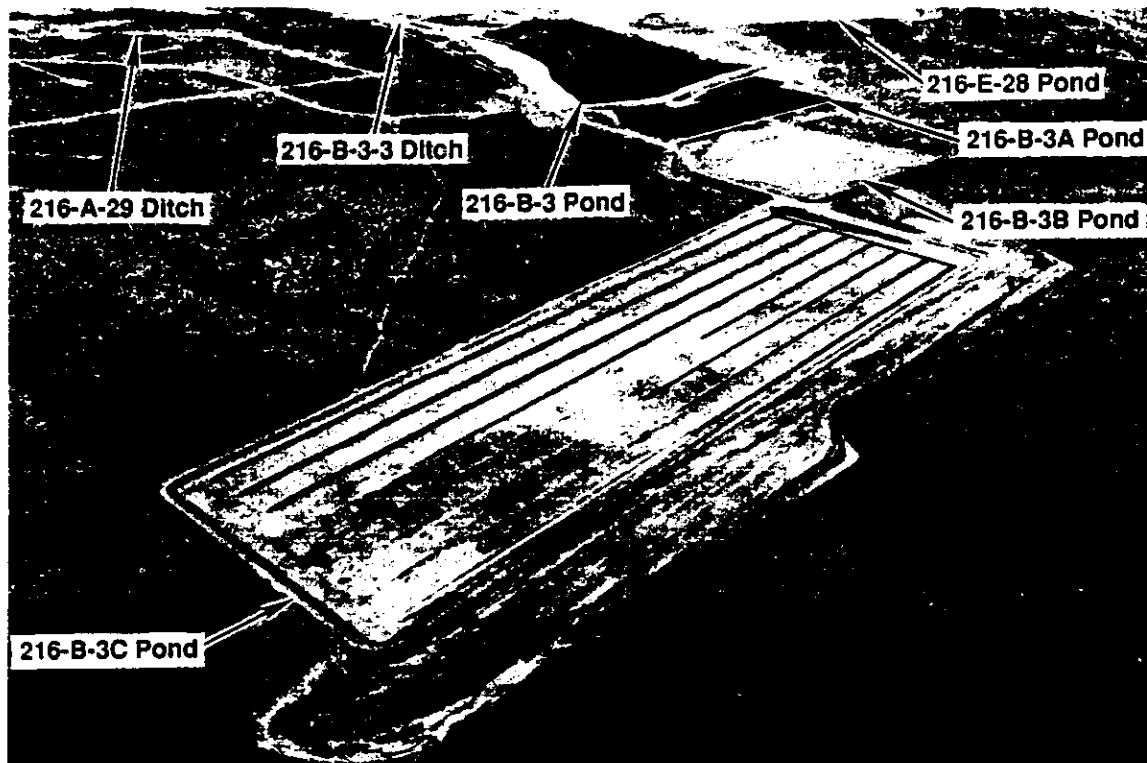
  
\_\_\_\_\_  
Co-operator  
Thomas M. Anderson, President  
Westinghouse Hanford Company

12/1/93  
Date

# 216-B-3 Expansion Ponds



## 216-B-3 Expansion Ponds



46°33'38.522"  
46°33'23.420"  
119°30'16.016"  
119°29'32.703"

93110825-1CN  
(PHOTO TAKEN 1993)

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Subject: HANFORD FACILITY DANGEROUS WASTE PART A PERMIT APPLICATION FORM 3,  
REVISION 0, FOR THE 216-B-3 EXPANSION PONDS (WA7890008967) (D-2-5)

## INTERNAL DISTRIBUTION

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